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ABSTRACT

History, tradition, culture, and superstition have played significant roles in influencing Chinese attitudes towards the mentally retarded. China's overwhelmingly rural, agricultural society has made it dependent upon a huge force of semi-skilled and unskilled labor, to which the retarded are contributorily capable. The stress on self-reliance, the import of everyone's potential contribution to societal efforts, adherence to the principles of normalization and integration for all persons, and the willingness of the Chinese family to assume much of the responsibility for the care of mentally retarded persons, has enabled this population to become socially and vocationally successful, often being satisfactorily integrated into productive communal life.

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China's Approach to Mental Retardation

Dr. Stephan Hittman

At its 26th session on 20 December 1971, the United Nations General Assembly adopted a Declaration on the Rights of Mentally Retarded Persons (Resolution 2856). This Declaration expressed a view based on the principles of the dignity of the human being, and the proper treatment of all persons with serious intellectual impairments. It proclaimed that the mentally retarded have the right to such help as will enable them to: (1) develop to their maximum potential, (2) engage in meaningful occupations, (3) live with their own families, and (4) participate in different forms of community life (Sterner, 1976). Although non-signatories of this Declaration, China has been among the world's leaders in adhering to the principles of normalization and integration for the mentally retarded.

China's long authoritarian rule and longer cultural and agricultural experience have helped shape it into a regulated society with a strong collective mentality for the common good. In part because of this, history and tradition loom large in Chinese life. Having long believed in the necessity of the families assumption of essential responsibilities for guiding the development of children, the actual strength of the Chinese family unit is beyond anything Western civilization can show. The degree of responsibility which family members assume for each other, the sacrifices and obligations which they are prepared to undertake, and the extravagant pride and affection which they have for their children, form a striking contrast to the rather narrow, loose family ties often found in Occidental nations. As a direct result of the strength of these ties, the Chinese family has traditionally accepted much of the responsibility for the care of mentally retarded and otherwise disabled individuals. Reluctant to trust to dependency on larger or more impersonal groups, the development of formal social agencies to provide services for persons at risk has been quite slow.

Traditionally, if a family had a mentally retarded member, parents would assume lifetime responsibility for him. If no longer in a position to do so, siblings or other close relatives were bound to his care. Thus the extended family system customarily protected all of its members, the larger

the family, the better able it has been to cope with the contingencies of life (Sung, 1967).

Prior to 1949 (when the Communists took power), mysticism, ignorance, and the superstitious fears of the populace dominated much of Chinese thinking about the handicapped. As in many other cultures, mentally retarded persons appear to have often been treated quite cruelly, despite China's deep reverence for family members.

Dr. James McCartney, an American neuropsychiatrist who practiced in China, described how mentally defective persons were treated in 1926. It is likely that these practices date back to antiquity and can be generalized to include the spectrum of disabilities. Handicapped persons:

> ...constitute a very helpless class in China. If caught upon the street doing anything wrong, they are arrested and thrown into prison and treated as if they were criminals. If they are harmless and wander in the streets, they are mocked and laughed at, and are often stoned. Their families often treat them as strangers and confine them in a dark room.
>
> If they tear their clothes or are otherwise destructive, their closest relatives disown them, although there may be true affection shown by a family, especially if he be a son. Most cases are kept chained at home. The head of the family is held responsible for the acts of the members; therefore, he has a desire to subject the member severely.
>
> The fact that demon possession is believed in often results in cruel treatment to try to drive the demon out (Chinese Psychiatry Revisited, 1972).

Since 1949, China has attempted to eradicate this feudal thinking via instruction in a new morality, based primarily on their newly adopted social, economic, and political goals. The writings of Mao Tse-tung have been the principal vehicle for transforming China's feudal way of thinking -- traditionally characterized by superstition, fatalism, and illiteracy -- to a modern scientific outlook. The Chinese have attempted to bridge this enormous gap in but a single generation (Sidel, 1972).

Human life, when compared with other factors of production, especially during times of stress or turmoil, has been abundant and therefore cheap. Euthanasia and infanticide, which formerly were commonly practiced throughout China, are now unacceptable concepts help up to ridicule. The necessity for the existence of a Mount Taygetus (i.e., the mountain upon which the Spartans abandoned infirm or unwanted babies, to perish or be devoured) in contemporary

Chinese society, appears to have been eliminated. China today, openly expresses its growing awareness and appreciation of the fact that mentally retarded persons can become contributing members of society. Given functional academic and vocational instruction, the retarded can and usually do become socially and vocationally successful, with the large majority of them being satisfactorily integrated into productive communal life.

All persons in China, including the mentally retarded, are part of several interlocking social networks. Having historically lived in large kinship systems, China has had a rich heritage upon which to build. The average person today is a member of a nuclear family, an extended family, a work group, a political study group, a neighborhood committee, and often other networks as well. This social web, functioning as an interlocking directorate of people, is so effective that an elaborate mental health delivery system, as we have come to know it, has never developed. The Chinese say with great pride, "We don't have a professional called a social-worker because in China, people take care of each other" (Goldner, 1977). This thinking holds true for psychologists and special educators as well.

In any society, the greater the number of people meaningfully intervening in the lives of retarded persons, the less likely will be their deterioration and dependence upon others. China's traditional family culture continues to provide opportunities for persons with impaired intelligence to lead lives integrated in the community, to take part in various chores and other common activities, and to develop their potentials to the maximum extent possible. Additional societal efforts are also underway to provide worthwhile leisure-time activity for the retarded, this considered to be among the most important aspects of normalization, preventing idleness and isolation while promoting pleasurable opportunities for physical and psychical restoration.

In China, as elsewhere, the past is an organic part of the present; its vestiges are visible in attitudes and institutions, and ultimately, the cause for much of what is observed in the present, lies in the past. The fundamental Chinese belief in human educability, coupled with their ideology of a classless society in which everyone is important, but no one is special, has brought about a non-discriminatory popular education. Children are not

separated into groups of gifted, slow, learning disabled, or the like, thereby segregating a child's learning environment at an early age. Greater emphasis is placed on the ways children are alike, rather than different, in their inquisitiveness, quest for self-concept, and potential to become caring and socially responsible human beings. This is why a non-segregated learning environment is important (Chan, 1977).

Psychometric evaluations are not in use in China, and there appears to be a widespread disenchantment with intelligence tests in general. If testing is ever to develop however, it is likely that China will lean towards criterion-referenced testing, where the focus is on what the individual can do and what he knows, and not on how he is compared with others, as is the case with norm-referenced tests.

Moral education, elevating one's political and communal consciousness, and developing an acute sense of social responsibility, continue to be the acknowledged principal functions of schools in China; academic and intellectual studies come thereafter. Thus, the Marxian concept, "From each according to his ability, to each according to his need," continues to influence practical curriculum. This concept contributes to minimizing theoretical speculation while maximizing the practical application of learned competencies.

While several institutions (known as hospitals) for a small number of profoundly mentally retarded persons are acknowledged to exist, this appears to be the extent of long-term governmental services or facilities. Some severely retarded children attend special kindergartens, but this is viewed as only a temporary measure, and only until they are ready for placement in a regular class.

Once a teacher suspects that a student is mentally retarded, or discovers him to have some cognitive, emotional, or behavioral problem, this is immediately communicated with the parents. Teachers interpret these problems to be within their realms of responsibility, in addition to that of the parents, and voluntarily augment the attention they pay to this youngster. Supported by organized youth groups -- such as the Young Pioneers, Red Guards, or Communist Youth Leaguers -- teachers help the impaired student to keep up with his classmates as best he can (Sidel, 1972). Posters in schools bear the slogan, "Help One Another." Teachers and superior students alike are encouraged

to stay long after the regular school-day has ended to help those who are slow learners, this being a direct application of the "Help One Another" philosophy. Retardates are usually mainstreamed into regular elementary school classes, as there are no "special" classes, per se. Even crippled children are physically carried to school by their classmates, so as to facilitate opportunities for education.

From their earliest years on to graduation, mentally retarded students are made to feel that they are part of the community, and not separated from it. They learn to sing, dance, recite, participate in theater groups, and engage in political study along with everyone else. The majority of adolescent and older retardates can generally be found employed in agriculture, since academic or comparable performance requiring literacy are not essential criteria for survival in China's so-called "developing" society.

Retarded and other handicapped students live in their own neighborhood and attend school from 8 AM to 3 PM, usually six days a week. They have a regular nine-year educational program of classroom work from age 7 to age 16, plus one year of what we would call vocational training. The focus of their schooling is sixfold: Political, cultural, agricultural, vocational, athletic, and academic.

Requiring limited skills for specific tasks while contributing to communal efforts, retarded individuals clearly make a positive contribution to their country, gain the respect of their family and fellow-workers, and live a life of meaningful experience and community involvement. Thus the real issue is an attitudinal one. Eighty percent of the population of China, over 650 million people, live in the rural countryside. The retarded can and are being absorbed into China's overwhelmingly rural, agricultural society which, for quite some time to come, will continue to be dependent upon a huge force of semi-skilled and unskilled labor. To this end, the retarded are contributorily capable.

China's appraoch to mental retardation, and to community mental health in general, stresses self-reliance and mutual dependence, all within a framework of group dynamics. Non-labeling, de-stigmatization, and integration into community life are emphasized. The social consequences of handicapping conditions, that is, inability to find a job, loss of family support, loss of

one's role in the community -- things that traditionally contribute to chronicity -- are not characteristic of modern China. Indeed, the watchword of the entire approach can be attributed to Mao Tse-tung's axiom: "Let us heal the wounded and rescue the dead."

Each nation raises its young in keeping with its own history, culture, and vision of the future. China's educational system is based on a set of assumptions which have derived from a world outlook that is distinct to their own experience. Insofar as China may want to learn from industrialized societies, they may well find it possible to avoid many of our mistakes, while adapting favorable methods to their own situation.

It is generally felt that special education is more of an acute problem in industrialized societies than it is in agricultural ones, this primarily because in agricultural societies the exceptional child can usually more easily adapt. While some might be tempted to draw comparisons between American and Chinese approaches to educating the mentally retarded, it is important to remember that to us, as Westerners, China presents an entirely different scale of values. The United States and China have evolved from and represent two very different cultures. It is essential that we recognize that what is feasible in one, may not be so for the other.

The ability to generalize across countries, that is, to compare systems and practices in China with others, is clearly not an easy task. Likewise, it would be dangerously naive to make blanket recommendations for one country based on the practices of another.

Developing societies, like China, often seek to solve their general educational problems first, usually by providing elementary and secondary educational opportunities for those with relatively uncomplicated learning needs, while attempting to raise the average literacy level of their citizenship to some arbitrary point. General education programs of this type are now well underway in China, and appear to be roughly consistent with their desired long-range expectations. As China develops technologically however, it is anticipated that the future will see a reduced dependence on semi-skilled and unskilled labor. It has been argued that greater specialized instruction for those with more complicated learning needs, such as the mentally retarded, is an additional inevitable consequence of industrialization. Thus, habilitative and

rehabilitative services in China are likely to be something of a changing picture, which we in the West would do well to observe.

The United States and China share a firm commitment to the education of mentally retarded and other disadvantaged persons, as is their right, not privilege. Both have sought to grant preferences to those who historically have been excluded from the potential rewards of life. Finally, both have attempted to improve the quality and delivery of supportive services to handicapped individuals, and to their families as well.

While one can always learn from the good, and bad examples of another school system, Western experiences in special education obviously cannot be directly applied in China's differing social, political, and economic situation. Greater efforts on our part to understand the Chinese attitude toward and program for the mentally retarded, may provide us with perspectives from which we could more critically analyze special educational efforts within our own society.

Each country has evolved its own unique ways of coping with its responsibilities toward the handicapped. While each has weaknesses, each also has areas of excellence that might, and actually do, serve as models for emulation across their borders (Juul, 1978).

China has made a substantial contribution to providing a dignified place in society for its handicapped population. It is hoped that the First World Congress, with its resultant cross-cultural and inter-governmental dialogue, will herald a new era of international cooperation in promoting services for the handicapped. Finally, it is hoped that other nation's will be assisted in evolving viable programs and policies, reflecting their own unique national and local conditions, for all the world's citizens with special needs.

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Bibliography:

Anglo-Chinese Educational Institute. Education in China. London, January 1974.

Auerback, H. Visit to a school for deaf-mute children. China and Us, 7(2), March-April 1978.

Barendsen, R.D. The educational revolution in China. Washington, D.C.: Department of Health, Education, and Welfare (Publication No. OE-73-19102), 1973.

Chan, I. Early education in China and its implication in the United States. Berkeley, CA.: Asian-American Bilingual Center, April 1977.

Chavez, L. An interview with Mary Berry. American Educator, 1(4), December 1977.

Chinese medical team in Yemen. Peking Review, No. 46. Peking: Foreign Language Press, 1969.

Chinese psychiatry revisited. Medical World News, 13(11), March 1972.

Coolidge, M.R. Chinese immigration. New York: Henry Holt and Company, 1909.

Education in China today. US-China Review, 2(2), March-April 1978.

Fairbank, J.K. The United States and China. New York: Viking Press, 1968.

First Pacific forum on mental retardation: Proceedings. Washington, D.C.: Department of Health, Education, and Welfare (Publication No. OS-72-18), 1971.

Fraser, S. (Ed.). Chinese communist education. New York: John Wiley and Sons, 1965.

Gamberg, R. Red and expert: Education in the People's Republic of China. New York: Schocken Books, 1977.

Gamberg, R. What about education in China? Far East Reporter, New York, 1976.

Goldner, V. Mental health treatment in China. China and Us, 6(3), May-June-July, 1977.

Hittman, S. Cultural influences upon Chinese attitudes towards the handicapped. Unpublished manuscript. New York: Teachers College, Columbia University, 1973.

Hittman, S. Special education in the People's Republic of China. Paper presented at the 55th Annual Convention of the Council for Exceptional Children, Atlanta, Georgia, April 1977.

Horner, P. China's struggle in medicine: The struggle between two lines. Unpublished manuscript. New York, October 1970.

Hsu, C.C. Special education for the mentally subnormal children in Taiwan. American Journal of Orthopsychiatry, 38(4), July 1968.

Hu, C.T. Aspects of Chinese education. New York: Teachers College Press, 1969.

Hu. C.T. (Ed.). Chinese education under communism. New York: Teachers College Press, 1962.

Hu, C.T. Education in China: Redness versus expertness. Perspectives in Education, 6(2), Spring 1973.

Hu, C.T., & Beach, B. A Russian-Chinese-English glossary of education. New York: Teachers College Press, 1970.

Juul, K.D. European approaches and innovations in serving the handicapped. Exceptional Children, 44(5), February 1978.

Kuo, W.F., Chen, Y.H., & Liang, C.N. National prevalence study on exceptional children in the Republic of China. Special Education Center, National Taiwan Normal University, 1976.

Lifton, R.J. Revolutionary immortality: Mao Tse-tung and the Chinese cultural revolution. New York: Vantage Books, 1968.

Mao Tse-tung. Mao Tse-tung's thought is the invincible weapon. Peking: Foreign Language Press, 1968.

Mao Tse-tung. On contradiction. Peking: Foreign Language Press, 1967.

Mental health care: A community task. China and Us, 1(2), July-August 1972.

New treatment for the insane. China Pictorial, No. 11. Peking: Foreign Language Press, 1971.

Parker, F. What can we learn from the schools of China? Bloomington, Ind.: Phi Delta Kappa Educational Foundation, 1977.

Price, R.F. Education in communist China. New York: Praeger Books, 1970.

Quinn, J.R. (Ed.). Medicine and public health in the People's Republic of China. Washington, D.C.: Department of Health, Education, and Welfare, National Institute of Health (Publication No. NIH-72-67), June 1972.

Sidel, R. Women and child care in China. New York: Hill and Wang, 1972.

Sidel, R., & Sidel, V.W. Education in the People's Republic of China. Teachers College Record, 76(4), May 1975.

Sterner, R. Social and economic conditions of the mentally retarded in selected countries. Brussels: International League of Societies for the Mentally Handicapped, 1976.

Sung, B.L. The story of the Chinese in America. New York: Collier Books, 1971.

Suyin, H. Reflections on social change. Bulletin of the Atomic Scientists, 22(6), June 1966.

Yamaguchi, K. History and present status of mental retardation. Paper presented at the 1973 Asian Conference on Mental Retardation, Manila, The Philippines, 1973.